Anthrax
Vaccine
Immunization
Program

Leader's Briefing

8 February 2007

Commander's Program

- **The Anthrax Vaccine Immunization Program (AVIP) remains a commanders force protection responsibility.**
  - Commanders will follow DoD guidance to properly identify and educate Servicemembers and DoD civilians to be vaccinated, track immunizations, and ensure appropriate medical evaluation if they experience adverse symptoms following any vaccination.
  - Commanders decide appropriate administrative or disciplinary action, if any, for Servicemembers declining mandatory vaccination.
- **Education.**
  - The AVIP remains a Commander's responsibility to better ensure their troops' force health protection.
  - Experience shows that education is pivotal to AVIP success and Servicemember acceptability. Commanders should review the "education tool kit" and the "Question and Answers" posted on the website, www.anthrax.mil or www.vaccines.mil/anthrax

History of the Anthrax Vaccine Immunization Program (AVIP)

- Secretary of Defense ordered the AVIP in Dec 97
- Vaccinations began in Southwest Asia in Mar 98 / Vaccinations began in Korea in Aug 98
- Slowdowns in 2000-01. After supply restored, program resumed 2002
- Injunction issued against DoD in Oct 04
- FDA issues Emergency Use Authorization (EUA) in Jan 05
- FDA formally issues Final Rule/Final Order on 19 DEC 05
- AVIP continued as during EUA: same people, voluntary basis
- Deputy Secretary of Defense issued AVIP policy in Oct 06 to re-established a mandatory program for those in higher risk areas and with special roles; policy allows voluntary vaccinations for other groups
- Under Secretary of Defense for Personnel and Readiness released DoD implementation guidance for the AVIP policy in Dec 06

Current Policy Implementation

- **Vaccinations are <u>mandatory</u> for DoD Service-members, emergency essential designated civilians, and contractor personnel performing mission-essential services assigned to:**
  - Central Command area of responsibility for 15 or more consecutive days.
  - Korean Peninsula for 15 or more consecutive days
  - Special units with Bio-warfare or Bio-terrorism related missions
  - Specialty units with approved exception to policy

- **Vaccinations shall begin, to the extent feasible, up to 120 days prior to deployment or arrival in higher threat areas.**

Current Policy Implementation

- **Vaccinations are <u>voluntary</u> for DoD Servicemembers:**

  Who are not in the mandatory groups and have received at least one dose of anthrax vaccine absorbed during or after 1998

- **Vaccinations are <u>voluntary</u> for DoD civilians and adult family members; contractors and their accompanying US citizen family members:**

  – Residing in Central Command area of responsibility for 15 or more consecutive days

  - or -

  – Residing on Korean Peninsula for 15 or more consecutive days

- **DoD Civilian Personnel Management Service concluded notification to National Unions 12 Jan 07**

Medical and Administrative Exemptions

- **Some people should not get anthrax vaccine.**

- **Temporary medical exemptions include:**
  - Women who are pregnant, or uncertain if pregnant
  - Acute diseases, surgery
  - Short-term immune suppression
  - Medical evaluation or condition pending

- **Permanent exemptions can include:**
  - Severe allergic reaction or other serious reaction after a previous dose of anthrax vaccine
  - People with a possible history of latex sensitivity
  - HIV infection or other chronic immune deficiencies
  - People who have or had Guillain-Barré syndrome (GBS)
  - Recovery from previous anthrax infection

Medical and Administrative Exemptions

- **Temporary administrative exemptions include:**
  - Emergency Leave
  - PCS, UCMJ actions, AWOL, and legal action pending

- **Permanent exemptions can include:**
  - Missing in action, prisoner of war
  - Discharge, separation or retirement

- **Administrative and Medical exemption codes for input into service specific immunization tracking systems are located in:**
  - Admin: USD(P&R) Memorandum,”Policy on Administrative Issues Related to Anthrax Vaccination Program”, August 6, 2002
  - Medical: ASD(HA) Memorandum,"Policy on Clinical Issues related to Anthrax Vaccination Program,” August 6, 2002

Anthrax Vaccine Refusals

- **If a Servicemember subject to mandatory vaccinations declines to be immunized:**
  - Ensure that the Servicemember understands the purpose of the vaccine.
  - Advise Servicemember of the possibility that anthrax may be used as a biological weapon against the U.S. and its Allies
  - Ensure that the Servicemember is educated about the vaccine and has been able to discuss any objections with medical authorities.
  - Counsel the Servicemember, in writing, that he or she is legally required to be immunized; that if the individual continues to refuse to be immunized that he or she will be legally ordered to do so, and that failure to obey the order may result in UCMJ and/or administrative action for failure to obey a lawful order (UCMJ, Article 92) as deemed appropriate by the commander.

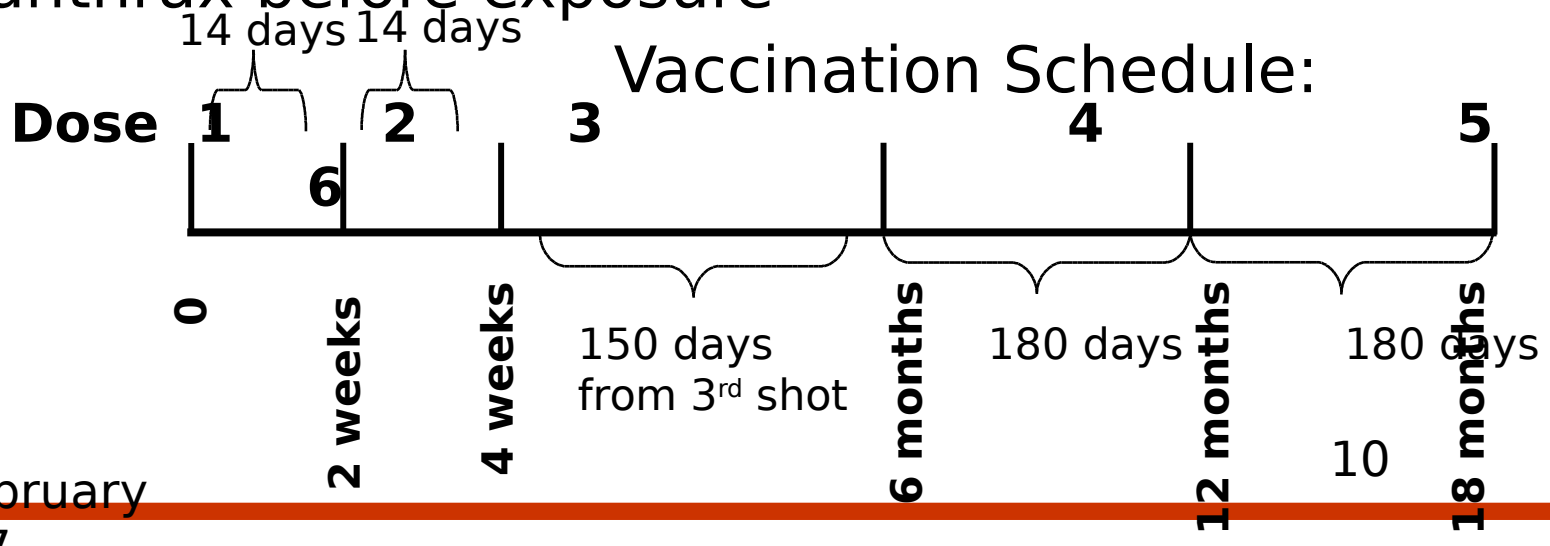
- **If after any of the steps listed above, a Servicemember elects to be immunized, adverse action will not normally be taken based solely on the initial declination.**

Threat

- **Anthrax Spores: the most likely bioweapon.**
  - Relatively easy and cheap to produce.
  - Can be stored for a long time.
  - Can be dispersed in air in a variety of ways.
  - Odorless, colorless, tasteless, difficult to detect.
  - Inhalation anthrax is highly lethal.
- **Anthrax spores can cause widespread illness and death among unprotected people.**

Anthrax Vaccine Facts

- Manufactured by Emergent Biosolutions in Lansing, MI
- A study in mill workers showed anthrax vaccine was 92.5% effective in preventing anthrax (including both cutaneous and inhalation anthrax)
- Each vaccine lot is authorized for release by the FDA before shipment
- No other product is approved by FDA to prevent anthrax before exposure



Anthrax Vaccine Safety

- **Over 1.4 million people vaccinated with over 5.8 million doses**
- **Injection-site reactions common:**
  - 30% of men, 60% of women have injection-site reactions
  - Burning, soreness, redness, itching, swelling, or pain
- **Systemic symptoms (beyond injection site):**
  - 5% to 35% of both genders
  - Muscle or joint aches, headaches, rashes, chills, mild fever, fatigue, swelling may extend below elbow
- **Acute allergic reactions after any vaccine, 1 in 100,000 doses**
- **The risk of any vaccine causing serious harm or death is**

How Individuals May Verify Status in Electronic Tracking Systems

ARMY

- Log on to AKO
- Navigate to the “My Medical” page and select “My Medical Readiness”.
- Select “View Detailed Information” under the “Immunization Profile” stoplight. This link provides a link to print the individual immunization record.

NAVY & MARINES

- Individuals can contact their units readiness or medical readiness coordinator who can access SAMS, MRRS or the units DEERS reports.
- Immunization status should be reviewed during the preventive or periodic health assessment.

AIR FORCE

- Individual airman can review their status on the AEF online website: https://aefcenter.afpc.randolph.af.mil/
- Go to "Deployment Information" then "Personal Deployment Preparedness“ link, login and status will be displayed, including any immunizations currently required in the "Action needs list".
- Unit Commanders can monitor immunization status of their troops using the

Key Messages

- **Your health and safety are our #1 concerns.**
  - Vaccines help keep you and your team healthy.
  - Vaccines have kept troops healthy since the days of George Washington.
  - Vaccination offers a 24/7 layer of protection in addition to antibiotics and other measures that is needed for certain members of the Armed Forces.

- **The anthrax vaccine is safe and effective.**
  - The vaccine is effective: Anthrax vaccine protects people from infection.
  - The vaccine is safe: Anthrax vaccine is safe, as safe as other vaccines.
  - The vaccine is approved by the Food and Drug Administration (FDA)

- **Anthrax: The threat is real.**
  - Anthrax is a top threat for use as a biological warfare agent.
  - Several potential adversaries have worked to develop an offensive biological warfare capability using anthrax.
  - Anthrax was used as a biological weapon in the United States.

For More Information

- Military Vaccine (MILVAX) Agency
  - Website: www.anthrax.mil www.vaccines.mil
  - Toll-Free: 877.GET.VACC
  - E-Mail: vaccines@amedd.army.mil

- For medical advice about your vaccination (24/7)
  - DoD Vaccine Clinical Call Center: 866.210.6469

- For clinical consultation or exemption assistance, contact the Vaccine Healthcare Center (VHC):
  - Website: www.vhcinfo.org
  - E-Mail: askVHC@amedd.army.mil

- CDC National Immunization Hotline
  - Toll-Free: 800.232.2522